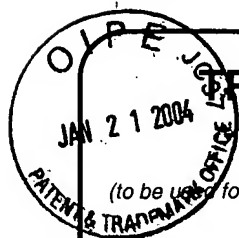


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|---|----|------------------------|------------------|
| <b>TRANSMITTAL FORM</b><br>(to be used for all correspondence after initial filing) |    | Application Number     | 10/072,435       |
|   |    | Filing Date            | February 8, 2002 |
|   |    | First Named Inventor   | Shermer, et al.  |
|   |    | Group Art Unit         | 1772             |
|   |    | Examiner Name          | Jane J. Rhee     |
| Total Number of Pages in This Submission  | 12 | Attorney Docket Number | 0275S-000563     |

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| ENCLOSURES (check all that apply)   |   |   |
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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Response<br><input checked="" type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>return receipt postcard</b> |
| Remarks   |   | The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 02-2548. A duplicate copy of this sheet is enclosed.  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                                  |  |                              |
|--|----------------------------------|--|------------------------------|
| Firm or Individual name                    | Harness, Dickey & Pierce, P.L.C. | Attorney Name<br>Ryan W. Massey<br>Jeffrey L. Snyder | Reg. No.<br>38,543<br>43,141 |
| Signature                                  |                                  |  |                              |
| Date                                       | January 21, 2004                 |  |                              |

| CERTIFICATE OF MAILING/TRANSMISSION   |                                    |                        |                               |
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